

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 195

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) William Adams			Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2014		
Mailing Address PO Box 1			Transaction ID : SA11AI.8915		
City Portersville	State PA	Zip Code 16051	Amount of Each Receipt this Period 1000.00 contribution		
FEC ID number of contributing federal political committee. C					
Name of Employer Adams Manufacturing Group		Occupation CEO			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00			
B. Full Name (Last, First, Middle Initial) Christine Allen			Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014		
Mailing Address 399 Cornetti Road			Transaction ID : SA11AI.9622		
City Fenelton	State PA	Zip Code 16034	Amount of Each Receipt this Period 2600.00 In-kind - Fundraising Table and Chair rental		
FEC ID number of contributing federal political committee. C					
Name of Employer Shilo Ranch Hunting Preserve		Occupation Owner			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3600.00			
C. Full Name (Last, First, Middle Initial) Jeremy Allen			Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2014		
Mailing Address 6420 Utah Avenue, NW			Transaction ID : SA11AI.8563		
City Washington	State DC	Zip Code 20015	Amount of Each Receipt this Period 250.00 contribution		
FEC ID number of contributing federal political committee. C					
Name of Employer America's Health Insurance Plan		Occupation Vice President			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			
SUBTOTAL of Receipts This Page (optional).....			3850.00		
TOTAL This Period (last page this line number only).....					